# Module II:

# Supervision in the Mental Health-Friendly Workplace

# MODULE II: SUPERVISION IN THE MENTAL HEALTH-FRIENDLY WORKPLACE

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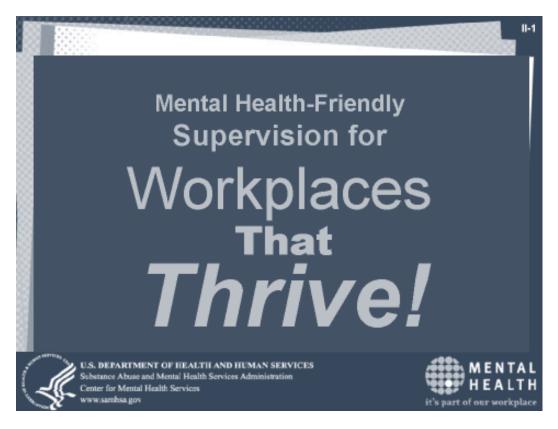
- Table: Training Materials and Learning Activities Overview
- PowerPoint slides and facilitator notes
- Handouts (for participants)

# MODULE II: TRAINING MATERIALS AND LEARNING ACTIVITIES OVERVIEW

PowerPoint Slides	Handouts	Learning Activities	Resources for Trainer Preparation
1: Title Slide		Facilitator presentation	Notes on PowerPoint slide
2: Goal		Facilitator presentation	Notes on PowerPoint slide
3: Module Objectives		Facilitator presentation	Notes on PowerPoint slide
4: Mental Health Friendly Workplace	Handout 1, MHF Circle	Facilitator presentation	Notes on PowerPoint slide; Module I
5: John's Story	Handout 2, John's Story	Case study/facilitated discussion	Notes on PowerPoint slide
6: Americans with Disabilities Act (ADA)		Facilitator presentation/ discussion	Handout 3; Notes on PowerPoint slide
7: ADA-continued		Facilitator presentation/ discussion	Handout 3; Notes on PowerPoint slide
8: ADA-continued	Handout 3, ADA	Facilitator presentation/ discussion	Handout 3; Notes on PowerPoint slide
9: What Can a Supervisor Do?		Facilitated discussion	Handout 4; Facilitator advance preparation (see notes on PowerPoint slide 9)
10: What Can a Supervisor Do?— continued	Handout 4, Tips for MHF Supervisors	Facilitated discussion	
11: Getting on Board	(facilitator- prepared)	Individual planning/ facilitated discussion	Facilitator advance preparation needed (see notes on PowerPoint slide 11)

# MODULE II: POWERPOINT SLIDES AND TRAINER NOTES

#### Slide II-1

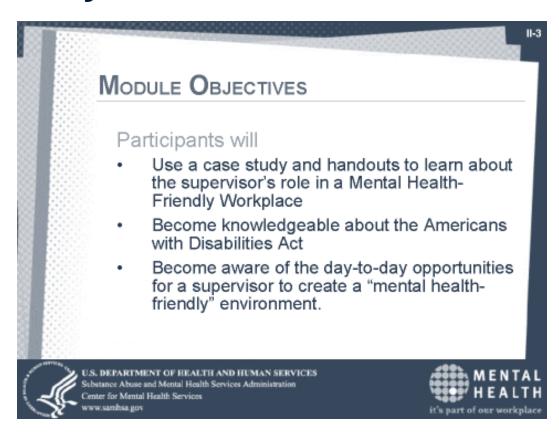


- This is the second training module in the Mental Health-Friendly Workplace series. Knowledge of the information in Module I, "Creating Workplaces That Thrive," is prerequisite to use of Module II.
- The focus in this module is on what supervisors need to know and do to effectively provide mental health-friendly supervision.
- As you will see, mental health-friendly supervision embodies practices that are good practice for ALL employees.

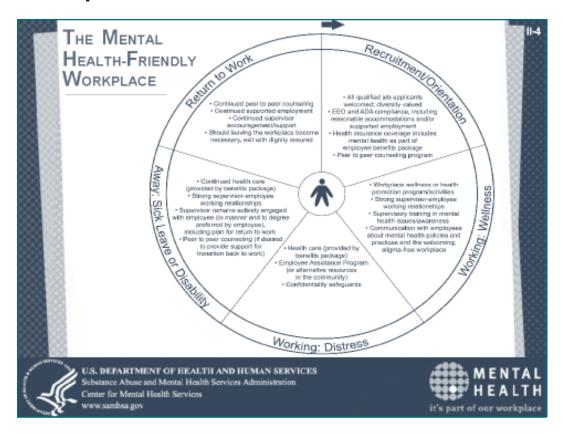




- READ goal [on slide] with participants.
- **REMIND** participants of the "Benefits to Business" of a Mental Health-Friendly Workplace, which were presented in Module I:
  - Higher productivity and motivation;
  - Reduced absenteeism;
  - Health insurance cost containment;
  - Loyalty and retention; and
  - Diversity, acceptance, and respect in the workplace.



- [Bring objectives up one at a time.]
  - The objectives describe some of the learning activities and information that are included in this module.
- EXPLAIN:
  - We will read and discuss a case study.
  - Handouts capture some of the most important information we discuss.
  - "Mental health-friendly" practices are good supervision practices for working with ALL employees.



- REMIND participants that they have seen this circle diagram of a
   Mental Health-Friendly Workplace in Module I. [But provide them with
   another copy, Handout 1, which they can use as a reference throughout
   this module.]
- **EXPLAIN:** Today's session provides some practice in identifying the appropriate role of a supervisor in all of the segments of the circle.



#### **Trainer Notes**

- This activity is based on a true story. Names and details of the companies have been changed for reasons of confidentiality, but the essential elements of the story are authentic.
- Distribute Handout 2, and ask participants to read it in preparation for a discussion about it.
- DISCUSSION:
  - Compare and contrast the differences in what John experienced in Companies A and B.
  - Capture points on flipchart.

#### **Trainer Crib Notes**

**Company A:** What mental health-friendly policies/practices did you notice?

- They had an employee assistance program and publicized it.
- Supervisor was open to making a reasonable accommodation.
- Company policy/support appears to have been in place.

What other aspects made John comfortable in seeking help?

- A coworker had self-disclosed, with no apparent ill effects.
- Positive buzz about the EAP created "normalcy" in seeking help.

**Company B:** What mental health-friendly policies/practices are apparent?

- None are apparent; but there was an EAP. Ideas about why it was unknown?
- Discuss the supervisor's handling of John's request.
- Talk about the bottom line impact of Company B's decision.



Section VI, Module II: Supervision in the Mental Health-Friendly Workplace PowerPoint Slides



- Handout 3 is a useful reference for your discussion. Distribute it as a summary after the discussion.
- In preparing for this discussion, you may also want to study some of the employer information on the Equal Employment Opportunity Commission (EEOC) Web site: www.eeoc.gov.
- The ADA points continue on the next 2 slides.

## Slide II-7 a and b





- [Bring bullets up one at a time. Add comments specific to the policies and practices in your workplace.]
  - Entertain questions.
  - Proceed to next slide.



#### Slide II-8 a and b





- Use Handout 3 as a reference to provide more detail about these examples.
- Suggest that supervisors go to the EEOC Web site, the agency with responsibility for enforcement of the ADA, www.eeoc.gov.
- Distribute Handout 3 to participants as a summary for their reference.

#### Slide II-9a, b, c, and d

II-9a

II-9c





II-9b

II-9d

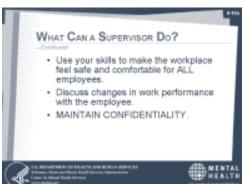




- Handout 4, "Tips for Mental Health-Friendly Supervisors," as well as Sections I through III of the resource, are reference materials for preparing to facilitate this portion of Module II.
- Come prepared to discuss company and other community "sources of help" for employees. You may wish to prepare a handout.
- [Bring items up one at a time as you discuss them. Reinforce the importance of the first bullet.]
- Points continue on the next slide.

#### Slide II-10 a and b

#### II-10a



#### II-10b



- Learn in advance what resources are available; e.g., resources that
  the company has for assisting employees in distress. You will likely
  want to prepare a handout for distribution to supervisors that lists
  names and phone numbers. You will also want to review company
  policy around HOW to make appropriate referrals.
- EXPLAIN: Now you are aware of performance behaviors you should pick up on. You are ready to explore what to do when such situations develop.
- Even though you have learned something about the signs and symptoms of some mental illnesses, **DO NOT** try to diagnose the problem yourself.
- Suggest the employee seek consultation. **CONFIDENTIALITY OF ANY DISCUSSION WITH THE EMPLOYEE IS CRITICAL.**
- DISCUSS company policy around HOW to make appropriate referrals.
- **DISCUSS** empathic ways to talk with employees (refer to Handout 4).
- **DISTRIBUTE** Handout 4 as a summary of this discussion.



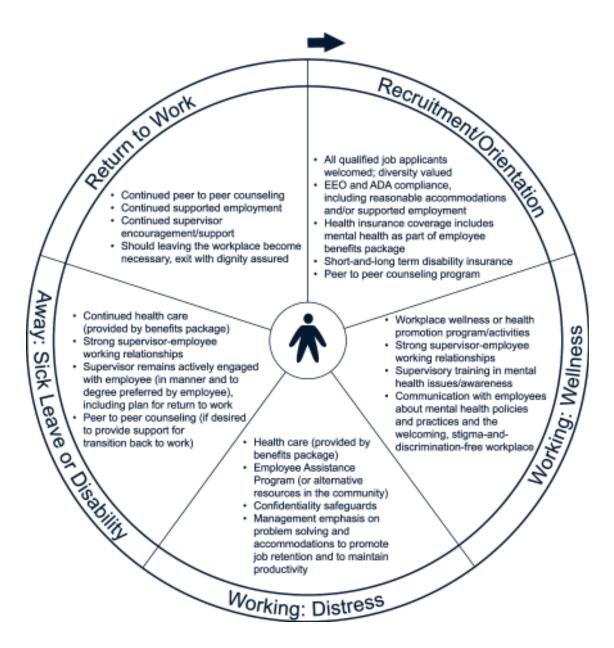
- ASK participants if they have had some thoughts/ideas about better ways to supervise during this module.
- Next steps include seizing day-to-day opportunities to make the workplace more mental health-friendly.
- Invite each participant to suggest one easy idea they can implement in the next day or week (capture on flipchart).
- When each participant has offered his or her suggestions, talk about what the company's human resources department is planning to do to support the supervisor's efforts (e.g., posters, health fair that will include mental health screenings, new wellness activities, e-mail messages, update key listings of help/resource numbers) [Note: you can type your items into this slide.]
- Review/recap session by returning to the goal and objective slides to ask, "How well did we do in achieving these?" (Slides 1 and 2)



# **MODULE II: HANDOUTS**

- Handout 1, A Mental Health-Friendly Workplace (Circle Diagram)
- Handout 2, John's Story
- Handout 3, Americans with Disabilities Act (ADA)
- Handout 4, Tips for Mental Health-Friendly Supervisors

# A Mental Health-Friendly Workplace



# **John's Story**

#### John's Employment With Company A

John was employed by a large mail order company in the Midwest when he first began to experience symptoms that were very new to him. He had always been a high performer. Only a few months earlier he looked forward to every day at work; now he didn't enjoy his job anymore. Really, he was sad most of the time. He wasn't sleeping well; and no matter how much sleep he got, it was never enough. He realized that the quality and quantity of his work output was slipping. His coworkers were commenting on his irritability as well.

Fortunately, John was very aware that his company had an employee assistance program (EAP). The services were widely publicized around the company—on bulletin boards, via the company's intranet, and in various company list updates for frequently used numbers. Because his supervisor had mentioned it at a recent staff training, he felt comfortable about turning to this resource. So he picked up the phone and arranged an appointment.

John learned that he had depression—a common, real, and treatable mental illness. A coworker/close friend that John had worked with for years had disclosed to him that she coped with a mental illness. The encouragement of this coworker gave John hope that with professional help he too could succeed. John chose to tell his supervisor about his newly diagnosed illness, and she arranged for him to have flexible hours so he could see a therapist and a psychologist, as well as have time to adjust to the side effects of his medication. With this support from his company, coworker, and supervisor, John once again excelled in his work.

Times changed. Fluctuations in the marketplace caused the company to consolidate operations and relocate his group to facilities in another State. Although John and his family could have moved with the company, both he and his family wanted to stay in the same community near aging grandparents and schools where the children were thriving.

#### John's Employment With Company B

John found a new job. For almost 5 years, he did very well with the new company. Then the economy experienced a downturn and the company needed to downsize. A number of employees were laid off. John and his remaining fellow employees found themselves working very long hours—often as many as 60 hours a week.

After a time, the heavy schedule began to take its toll on John's health. He constantly was stressed and tired. At this time, he didn't know that this company also had an EAP; later he learned that they did indeed have an EAPthere was simply no promotion of the fact. By the time he learned about the EAP, John already had consulted with his doctor and decided to request a temporary 32-hour work schedule for 6 weeks, with commensurate reduction in compensation. When John approached his supervisor about his illness and this request, she said she would consider it overnight. That evening the supervisor called John at home and asked him to resign. John was shocked by this rebuff to what he thought was a reasonable request and stunned by the prospect of unemployment as well. He did not simply resign as she had requested. The next day John consulted his physician and the company's human resources department. He was put on short-term disability with full pay and benefits for 8 weeks. A quick computation of the cost to the company of that alternative (8 weeks at full pay vs. 6 weeks of a reduced work schedule and paycheck) leads one to conclude that this resolution was bad business for both employer and employee.

John's story has a happy ending. Like most people with mental illnesses, he recovered with treatment and support. He continues to be a high performer but in a more mental health-friendly organization.

# **Americans with Disabilities Act (ADA)**

Title I of the Americans with Disabilities Act of 1990, which took effect July 26, 1992, prohibits private employers, State, and local government, employment agencies, and labor unions from discriminating in the following areas against *qualified individuals* with disabilities:

- Job application procedures;
- Hiring;
- Firing;
- Advancement;
- Compensation;
- Job training; and
- Other terms, conditions and privileges of employment.

An individual with a disability is a person who:

- Has a physical or mental impairment that substantially limits one or more of his/her major life activities;
- Has a record of such an impairment; or
- Is regarded as having such an impairment.

A qualified employee or applicant with a disability is an individual who, with or without reasonable accommodation, can perform the essential functions of the job in question.

Reasonable accommodations are "modifications to the job application process, the work environment, or job that will enable the qualified individual with a disability to perform the essential functions and enjoy equal benefits and privileges of employment. Employers do not need to provide accommodations if they can demonstrate that doing so would result in an undue hardship."

#### **Reasonable Accommodations**

Reasonable accommodations for persons with mental illnesses may be requested by the employee orally or in writing. Usually the request is made in a discussion between employer and employee. The ADA does not require that an applicant inform an employer about his or her need for a reasonable accommodation at any particular time, so this information need not be volunteered on an application form or in an interview.

Equal Employment Opportunity Commission (EEOC) regulations specify that the employer should take into account, but is not obligated to abide by, the employee's preference within the range of effective accommodations. The employer is not required to provide accommodations that would pose an "undue hardship" on the operation of the business. Similarly, workers cannot be forced to accept accommodations that are neither requested nor needed.

One study<sup>2</sup> of employers who have made reasonable accommodations for employees indicated that employers had not made the accommodations to comply with the law. Rather they cited other reasons for making them such as:

- It made good business (i.e., financial) sense;
- Such modifications are made for any employee who needs them;
- They had come to value the worker over time (i.e., for his/her skills or reliability); and
- They had empathy for the worker's needs and considered the accommodation fair or humane.

Examples of reasonable accommodations for persons with "psychiatric disabilities," as required by the Americans with Disabilities Act, could include:

#### **Schedule modification**

- Allowing workers to shift schedules earlier or later
- Allowing workers to use paid or unpaid leave for appointments related to their disability
- Allowing an employee to work part-time temporarily (e.g., when first returning from an absence)

#### Job modification

- Arranging for job sharing
- Reassigning tasks among workers
- Reassignment to a vacant position

#### Modifications to the physical environment

- Providing an enclosed office
- Providing partitions, room dividers, or otherwise enhancing soundproofing and visual barriers between workspaces

#### Changes in policy

- Extending additional paid or unpaid leave during a hospitalization
- Allowing an employee to make phone calls during the day to personal or professional supports
- Providing a private space in which to make such phone calls
- Allowing workers to consume fluids at their work stations throughout the work day (e.g., if needed due to medication side effects)



#### **Provision of human assistance**

- Allowing a job coach to come to the work site
- Participating in meetings with the worker and his/her job coach or other employment service provider

#### **Provisions of assistive technology**

- Providing a portable computer to enable an employee to work at home or at unusual hours
- Providing software that allows the worker to structure time and receive prompts throughout the work day

#### **Supervisory techniques**

- Offering additional supervisory sessions
- Offering additional training or instruction on new procedures or information

The EEOC has responsibility for enforcing several different discrimination laws, including Title I of the ADA. The provisions of the ADA are for all employers with 15 or more employees. The EEOC Web site, www.eeoc.gov, provides very practical, plain English facts and guidance for employers about compliance with the ADA, including examples of questions than an employer cannot ask on an application or during an interview.

#### **Endnotes**

<sup>1</sup> Work as a Priority: A Resource for Employing People Who Have Serious Mental Illnesses and Who Are Homeless. (2002) Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services, p. 71.

<sup>2</sup>Mancuso, Laura L., MS, CRC. (June 1993) "Case Studies on Reasonable Accommodations for Workers With Psychiatric Disabilities," in *Case Studies on Reasonable Accommodations for Workers*, a study funded by the Community Support Program, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services. Available online at <a href="https://www.mentalhealth.org/publicationsallpubs/CSoo-ooo8/accomo.asp">www.mentalhealth.org/publicationsallpubs/CSoo-ooo8/accomo.asp</a>.

# **Tips for Mental Health-Friendly Supervisors**

#### As a supervisor, you can:

- Learn about mental illnesses and sources of help. Attending this workshop and reading this handout is a good first step.
- Familiarize yourself with your company's health benefits.
- Find out if your company has an employee assistance program (EAP) or information about community resources that can provide onsite or offsite consultation.
- Recognize when an employee's work behaviors show signs of a problem affecting performance, which may be mental health-related, and refer the employee appropriately. Some of these signs are:
  - Decreased productivity;
  - Morale problems;
  - Difficulty concentrating, making decisions, or remembering things;
  - Lack of cooperation;
  - Displays of anger or blaming others;
  - Safety risks, accidents;
  - Frequent absenteeism;
  - Consistent tardiness;
  - Frequent statements about being tired all the time;
  - Complaints of unexplained aches and pains;
  - Lack of cooperation or a general inability to work with others;
  - Working excessive overtime over a prolonged period;
  - Strange or grandiose ideas; and
  - Alcohol and drug abuse.

As a supervisor, you cannot diagnose a mental illness. You can, however, note changes in work performance and listen to employee concerns. If your company does not have an EAP, ask a counselor for suggestions on how best to approach an employee whom you believe to be experiencing work problems that may be related to a mental illness.

• Think about how you can use your skills as a supervisor to help the person feel safe and comfortable in meeting with you. If the employee is dealing with a mental illness, you will want to minimize his or her stress—not contribute to it. In addressing the performance issues, you can be honest, upfront, professional, and caring in your approach.

- Think about the person's strong points and the contributions he or she has made. It will be important to talk about the ways in which the employee is valued before raising areas of concern.
- Consider open questions that will encourage an employee to request support or accommodation. (See sidebar.)
- Remember, your job is not to probe into an employee's personal life to diagnose an illness or to act as their counselor. Be prepared for the possibility that, while you may be opening a door to offer help, the employee may choose not to walk through the doorway.

Discuss changes in work performance with the employee. You may suggest that the employee seek consultation if there are personal concerns. Confidentiality of any discussion with the employee is critical. If an employee voluntarily talks with you about health problems, keep these points in mind:

- Do not try to diagnose the problem yourself.
- Recommend that any employee experiencing symptoms of a mental illness seek professional consultation from an EAP counselor or other health or mental health professional.

## What you can say:

"You've always been such a reliable staff person—top quality work done on schedule and within budget. But I'm concerned that recently you've been late to work often and are not meeting your performance objectives. I'd really like to see you get back on track. Is there anything that you can think of that would help you get back on track? Is there anything I can do to help?

"I don't know whether this is the case for you, but if personal issues are affecting your work, you can speak confidentially to one of our employee assistance counselors. The service was set up to help employees. You can discuss with the counselor whether you might need any accommodations. Our conversation today, and appointments with the counselor, will be kept confidential and will not affect your job. . .

"Let's get together 3 weeks from now, and talk again. We can see how the work is going, and whether any changes need to be made."\*

<sup>\* &</sup>quot;Managing Mental Health in the Workplace" (2002) Toronto, ON: Canadian Mental Health Association, p.10.

#### HANDOUT 4 page 3

- Recognize that a person experiencing a mental illness may need a
  flexible work schedule during treatment. Find out about your
  company's policy from your human resources department or the
  manager in charge of personnel policy.
- Remember that some mental illnesses may be life-threatening to the employee, but rarely to others. If an employee makes comments like "life is not worth living" or "people would be better off without me," take the threats seriously. Immediately call an EAP counselor or other specialist and seek advice on how to handle the situation.

#### • Professional help is available from:

- Physicians
- Mental health specialists
- Employee assistance programs
- Health maintenance organizations
- Community mental health centers
- Hospital departments of psychiatry or outpatient psychiatric clinics
- University or medical school affiliated programs
- State hospital outpatient clinics
- Family service/social agencies
- Private clinics and facilities

**Note:** The information and text of this handout was adapted from National Institutes of Health Publication No. 96-3919, which is available at <a href="https://www.nimh.nih.gov/publicat">www.nimh.nih.gov/publicat</a> and from "Managing Mental Health in the Workplace: How to talk to employees, deal with problems and assess risks," (2002). Toronto, ON: Canadian Mental Health Association.